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23413 7590 05/18/2005

CANTOR COLBURN, LLP
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08/11/2005 HDESTA2 00000013 061130 09892690

01 FC:2501 700.00 DA
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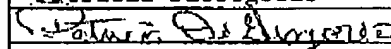
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Patricia DiGregorio

(Depositor's name)



(Signature)

August 10, 2005

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/892,690	06/27/2001	Seung Moon Ryu	SHN-0005	3977

TITLE OF INVENTION: POLARITY-ALTERNATED PULSE WIDTH CDMA AND METHOD FOR MEASURING DISTANCE USING THE SAME

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	XXX YES	XXXX \$700	\$300	XXXX \$1,000	08/18/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
DAVIS, CYNTHIA L	2665	370-212000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/147; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Casuh Corporation

(B) RESIDENCE (CITY and STATE OR COUNTRY)

Republic of Korea

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☒ Advance Order - # of Copies 5

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 06-1130 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Michael A. Cantor

Date August 10, 2005

Typed or printed name

Registration No. 31,152

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Bloomfield, CT 06002
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FACSIMILE TRANSMITTAL SHEET

DATE: August 10, 2005

TO: ISSUE FEE

COMPANY: U.S. PATENT AND TRADEMARK OFFICE

FAX NO.: (703) 746-4000

TEL. NO.:

FROM: Pat DiGregorio (Cantor Colburn LLP)

OUR REF: SHN-0005

YOUR REF: USSN 09/892,690

TOTAL NUMBER OF PAGES SENT
(INCLUDING THIS COVER SHEET): 2**COMMENTS: TO WHOM IT MAY CONCERN:**

Please find enclosed the Base Issue Fee and Publication Fee Transmittal Form for U.S. Serial No. 09/892,690. Also find a request for an Advance Order (5) of Patent copies.

Please charge the Base Issue Fee, Publication Fee and Advance Order Fee (\$1,015) to Deposit Account 06-1130.

Thank you,

CANTOR COLBURN LLP

If there are any problems with this transmission,
please call (860) 286-2929 and ask for P.DiGregorio

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